

# Inspection of safeguarding and looked after children services

Isle of Wight

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**Inspection dates** 7 to 17 September 2010

**Reporting inspector:** Derek Churchman

**Age group:** All

**Published:** 18 October 2010

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# Contents

<b>About this inspection</b>	<b>2</b>
<b>The inspecton judgements and what they mean</b>	<b>2</b>
<b>Service information</b>	<b>3</b>
<b>The inspection outcomes: safeguarding services</b>	<b>4</b>
1. Overall effectiveness	4
2. Capacity for improvement	5
3. Areas for improvement	7
4. Outcomes for children and young people	8
a. The effectiveness of services in taking reasonable steps to ensure children and young people are safe	8
b. The effectiveness of services in taking reasonable steps to ensure that children and young people feel safe	9
5. The quality of provision	10
6. Leadership and management	12
<b>The inspection outcomes: services for looked after children</b>	<b>17</b>
1. Overall effectiveness	17
2. Capacity for improvement	18
3. Areas for improvement	29
4. Outcomes for children and young people	20
5. The quality of provision	24
6. Leadership and management	27
<b>Record of main findings</b>	<b>31</b>

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## About this inspection

1. The purpose of the inspection is to evaluate the contribution made by relevant services in the local area towards ensuring that children and young people are properly safeguarded and to determine the quality of service provision for looked after children and care leavers. The inspection team consisted of four of Her Majesty's Inspectors and one inspector from the Care Quality Commission. The inspection was carried out under the Children Act 2004.
2. The evidence evaluated by inspectors included:
  - discussions with children and young people receiving services, front line managers, senior officers including the Director of Children's Services and the Chair of the Local Safeguarding Children Board, elected members and a range of community representatives
  - analysing and evaluating reports from a variety of sources including a review of the Children and Young People's Plan, performance data, information from the inspection of local settings, such as schools and day care provision and the evaluations of a serious case review undertaken by Ofsted in accordance with 'Working Together To Safeguard Children', 2006
  - a review of case files for children and young people with a range of need. This provided a view of services provided over time and the quality of reporting, recording and decision making undertaken
  - the outcomes of the most recent annual unannounced inspection of local authority contact, assessment and referral centres undertaken in June 2010

## The inspection judgements and what they mean

3. All inspection judgements are made using the following four point scale.

Outstanding (Grade 1)	A service that significantly exceeds minimum requirements
Good (Grade 2)	A service that exceeds minimum requirements
Adequate (Grade 3)	A service that only meets minimum requirements
Inadequate (Grade 4)	A service that does not meet minimum requirements

## Service information

4. The Isle of Wight is situated just off the coast of Central Southern England, with good connections to the mainland, by various ferry ports, into the major cities of Portsmouth and Southampton which provide good road and train links across the country. The island is largely rural accounting for 84% of the island's land mass. Working population levels are comparatively low with a high number of retired residents and an ageing population.
5. The island's population is approximately 140,200 with 29,700 children and young people aged between 0 and 19, and 6,500 children under the age of 5. The ethnic profile of the island is 93% white, with the largest minority ethnic group being Asian or Asian British at 1.3%. Some 2.3% of the Isle of Wight's child population are in receipt of targeted services and almost 20% of island's children live in poverty.
6. A number of strategic partnerships exist on the Isle of Wight including the Children's Trust Board which reports to the Island Strategic Partnership and the Local Safeguarding Children Board (LCSB). The Children's Trust Board membership comprises wide and appropriate representation including the Director of Children's Services, Superintendent Police Commander and senior health representatives from the NHS Isle of Wight Primary Care Trust (PCT), including the Director of Public Health. The LCSB is independently chaired and brings together the main organisations working with children, young people and their families in the area to deliver safeguarding services.
7. Children's care services are delivered through a Referral and Assessment Team, a Child Protection Team, a Looked After Children Team, the 16+ Team, the Adoption and Fostering Team, the Family Support and Intervention Team and the Children's Disability Team. Beaulieu House provides a short break residential unit and there is an emergency duty team which provides an out of hours social work service for children and adults.
8. As at August 2010 there were 193 looked after children; 88 children were subject to child protection plans, which is an increase on the figure for 2009/10. The local authority directly provides 123 approved foster care placements and commissions 27 placements from independent fostering agencies and 23 residential placements.
9. There are eight children's centres and ten extended services partnerships; all schools are part of these partnerships. The island is currently going through a large re-organisation of schools into the two-tier system of primary and secondary schools; as at September 2010, it has 41 primary schools, 13 middle schools and six high schools. There are two special schools and in addition two pupil referral units.

10. The Isle of Wight PCT is unique in England in that as well as commissioning and planning health services, it is also the main provider of acute care, mental health, and ambulance and community services. NHS acute hospital services are provided at St Mary's Hospital, the district general hospital on the Isle of Wight. In addition to the central hospital site of St Mary's in Newport, there are a variety of health clinics and community bases across the island from which many of the trust's services are delivered. Child and Adolescent Mental Health Services (CAMHS) are provided by the mental health directorate. The operational management of the Isle of Wight provider arm has recently been restructured and now comes under five clinically-led directorates.

## The inspection outcomes: Safeguarding services

### Overall effectiveness

**Grade 3 (adequate)**

11. The overall effectiveness of safeguarding services is adequate. The council and its partners have recently made considerable progress in addressing the significant service pressures particularly evident in children's social care. However, a background of changes in senior leadership in children's social care and significant and continuing staffing vacancies in the front line social work service have meant that progress in some areas has been slow since the joint area review in 2006. The new Director of Children's Services has put in place a number of robust systems and processes to improve partnership working and practice within social care, although it is too early to evaluate the impact of these arrangements. The PCT along with its local authority partners has developed a comprehensive business plan to improve the CAMHS on the island, which is currently inadequate. This plan is at an early stage of implementation. The council and its partners meet their statutory responsibilities as set out in *Working Together to Safeguard Children* and there is good evidence of co-operative multi-agency working relationships, both strategically and in practice at the front line. Some elements of service provision and business processes, for example CAMHS and the children's social care recording system, are not effective. Consequently, much further work is needed to ensure that high quality services are provided to improve outcomes for children and young people on the island.
12. The safeguarding needs of children and young people are prioritised adequately. The Children's Trust Board has a clear understanding of its strengths and the areas that require further development, although the Board's action to address issues, for example creating closer working relationships with the Isle of Wight Local Safeguarding Children Board (LSCB), have been relatively recent. The summary of progress of the Children and Young People's Plan 2009 – 2012, after one year, has appropriately focused the attention of partners to the Children's Trust

priorities. Further work is required with the involvement of the LSCB to ensure that the plan fully captures safeguarding priorities on the island.

13. The workforce development strategy, although at an early stage of implementation, is pragmatic, well conceived and resourced. Although there are significant shortfalls in social worker capacity that are having impact on the effectiveness of the children's social care service, these are being monitored and managed well to limit negative effects in individual cases. Thresholds for interagency intervention are clearly understood and there is good evidence of the appropriate use of the common assessment framework (CAF). There is also evidence of good collaboration and effective early intervention work among partners. Children and young people at significant risk of harm are identified and responded to in an appropriate and timely way.
14. The quality of initial and core assessments is too variable, particularly in the depth of their analysis, and a significant proportion of assessments and plans are poorly recorded. Front line supervision and the children's social care recording system are recognised as major contributory factors to the weaknesses in the quality of assessments.
15. Service users report that they are heard, and most indicate that they are treated with dignity and respect. Children, young people and their parents and carers are routinely involved in child protection planning conferences, and through core groups and reviews. If children are unable to attend, their views are well represented by their social worker. Children and young people make a limited contribution to the strategic development of services and as yet do not contribute to the work of the LSCB. The timeliness of child protection reviews is acknowledged as an area of underperformance that requires review of administrative and business processes, and the capacity of the independent reviewing service to meet current service pressures is a concern. Basic ethnicity and identity characteristics are evident in assessments, although in some cases there is insufficient analysis and recording of their impact in case planning.

## **Capacity for improvement**

## **Grade 3 (adequate)**

16. The council and partners have recently taken action to improve safeguarding arrangements, although it is too early to evaluate the impact of emerging improvement. Partner agencies and front line staff express a high level of confidence in the ability and leadership of the Director of Children's Services and the senior management team to accelerate and sustain recent improvements in safeguarding services. Their chief priorities are to improve the morale of staff in children's social care, the stability of teams and to tackle the significant staffing shortages. The relationship between the Children's Trust and the LSCB are as yet under developed, although there are early signs of the establishment of closer working arrangements. A major school reorganisation has been successfully

implemented to improve educational outcomes for children and young people on the island. This priority has resulted in less attention to wider safeguarding issues, particularly within the council's scrutiny arrangements.

17. The unannounced inspection of contact, referral and assessment arrangements undertaken in June 2010, acknowledged the attention and focus of senior leadership as a strength leading to improvements in front line practice. It found no priority areas for action, and a balance of satisfactory areas of practice and areas for development. The council has worked well to respond to the findings of the inspection through a detailed action plan at strategic and team levels, which is being implemented. The organisation of the duty team has been strengthened, including the recruitment of an additional senior practitioner to oversee the work of this team.
18. Safeguarding provision within the PCT is suitably supported by designated professionals and by named professionals within the provider directorates. There are sufficient school nurses in post, and effective action has been taken to fill health visitor vacancies and return staffing numbers to establishment levels. Management and supervision processes within the PCT ensure health visitors and school nurses receive adequate supervision and support from line managers and the safeguarding team when involved in child protection issues. Adequate arrangements are in place to ensure that the designated and named professionals also receive appropriate supervision. The high number of social worker vacancies is being addressed through significant additional investment agreed by the council to ensure that the remuneration of social work staff is competitive with that in neighbouring authorities. Other elements of the workforce strategy include a well-regarded training and support programme for newly qualified social workers. A well co-ordinated national recruitment campaign has been launched and has successfully attracted a good field of candidates. While the council is hopeful that they will soon be able to make a significant number of staff appointments, it is too early to see the impact of this initiative.
19. The council's outdated Integrated Children's electronic system (ICS) is having a significant impact upon the quality of social work recording and casework planning. The performance team frequently undertakes data cleansing to ensure the accuracy of the information available from the system. The council recognises the significant weaknesses of ICS and has begun to commission a successor system. Although service and front line practice audits take place regularly, there is insufficient evidence of improvement in practice following audits, which is most noticeable in the consistency of supervision, the robustness of management oversight, and challenge in casework decision making.



## Areas for improvement

20. In order to improve the quality of provision and services for safeguarding children and young people on the Isle of Wight, the local authority and its partners should take the following action:

### **Immediately:**

- Improve the timeliness of child protection reviews through a full evaluation of administration and the capacity of the independent reviewing service to meet identified need.
- Implement the agreed CAMHS business plan.

### **Within three months**

- Ensure that the social care recruitment and retention strategy for social care is fully evaluated following the outcome of the current recruitment campaign.
- Ensure the relationship between the Children's Trust and the Local Safeguarding Children Board is fully developed, and that a clear and comprehensive performance framework is agreed and implemented.
- Ensure robust arrangements are in place to consolidate learning from social care practice audits; improve the quality and consistency of assessments and challenge of casework supervision.

### **Within six months**

- Develop the scrutiny and challenge arrangements within the council to improve safeguarding outcomes for children and young people and their families.
- Ensure that the plan to commission changes to the Integrated Children's electronic system is implemented to enable improvements in recording practice, assessment and decision making.

## Outcomes for children and young people

### **The effectiveness of services in taking reasonable steps to ensure that children and young people are safe. Grade 3 (adequate)**

21. The effectiveness of services on the Isle of Wight to ensure that children are safe is adequate. Safeguarding strategies, policies and processes identify vulnerable groups, support and enable effective practice in most respects and comply with statutory requirements and guidance.
22. The LSCB is adequately fulfilling its statutory functions with regards to child protection and wider safeguarding work. The LSCB serious case review panel is well led and is providing a good level of challenge to member agencies. Learning from serious case reviews is well disseminated by agencies, and action plans arising from the one serious case review which was completed and evaluated by Ofsted are well progressed. Agencies are working together to tackle effectively issues of domestic abuse through good use of the Multi-Agency Risk Assessment Conference (MARAC). Children with mental health needs and their carers are not able to access an appropriate level of support from CAMHS.
23. The jointly commissioned Island Drug Alcohol Service (IDAS) is identifying and responding effectively to young people's drug and alcohol misuse, as seen by the reduction of admissions to hospital in relation to substance misuse. The service is focused on the higher level of tiers 3 and 4 work with little opportunity available for early preventative work within existing resources. There are good joint working arrangements between the IDAS and midwifery service with a dedicated midwife providing specialist support to pregnant young women who have a substance misuse problem. This targeted approach has resulted in improved attendances at ante-natal appointments by this vulnerable group. The support available to looked after children from IDAS is inadequate, with no specialist substance misuse worker providing specific preventative services to them.
24. Despite the significant pressures on children's social care and aspects of the provision of other partners, there is recent evidence of determined and effective leadership to tackle the current and outstanding safeguarding issues. The PCT is meeting its statutory responsibilities for safeguarding children. The chief nurse is the board level lead for safeguarding children and the experienced designated doctor and nurse provide a high level of support and guidance to both the trust board and operational staff. Staying safe outcomes have been judged good or better in all recent inspections in 2009/10, including the special schools, pupil referral units and early years private and voluntary care provision. Children and young people at significant risk are identified and responded to in a timely way, and there is good awareness of the need to keep children safe within early intervention and Accident and Emergency provision. Satisfactory protocols are in place to respond to children

missing from home and education, and the incidence of repeat missing from home reports has reduced. Multi-agency working to respond to the needs of children affected by domestic abuse through the MARAC is effective, with systematic follow up of children affected. Domestic abuse is well recognised and followed up by Accident and Emergency, medical and nursing staff, who regularly attend MARAC meetings and have developed good partnership working and timely information sharing arrangements with partners. Community and hospital staff in the Accident and Emergency department report good working arrangements with social services; the high levels of referrals progressing to the initial consideration stage reflect a sound understanding of referral thresholds.

25. The staff vetting system in social care is safe and secure, and is incorporated in service level agreements and contracts with commissioned service providers. Retrospective checking of previously employed staff is well underway. Statutory guidelines in relation to complaints against staff are appropriately followed, and the service learns from complaints. The role of the local authority designated officer is used to ensure children are properly safeguarded. The safer recruitment policy implemented by the PCT in December 2009 ensures that appropriate pre-employment checks are carried out on all new members of staff. New staff undergo an enhanced CRB check and retrospective checking of existing staff is now well underway. Regular reports on this activity are provided to the PCT board as part of routine performance monitoring.
26. Health outcomes for breastfeeding and infant mortality are around the national average. The teenage pregnancy strategy is having limited effect and remains a key priority for partners on the Isle of Wight. Although the rate of teenage pregnancies at 38% remains lower than the national average, it is above the regional average and the latest data show the trend to be slightly upward in contrast to the downward trend nationally. At 41% the percentage of teenage conceptions leading to terminations is below the national average and has been for a number of years.

**The effectiveness of services in taking reasonable steps to ensure that children and young people feel safe. Grade 3 (adequate)**

27. The effectiveness of services to ensure that children feel safe is adequate. All children interviewed during the course of the inspection confirmed that they feel safe in school and in their communities. Children and parents have commented very positively on early intervention services, including the CAF, the children's centres and the positive impact upon their lives. Children have however identified in local surveys that they are concerned by the behaviour of children on public transport. The partnership has taken appropriate action through the installation of CCTV and increased vigilance from Police Community Support Officers. Anti-bullying strategies are a high priority for the partnership in order to reduce the fear of bullying. These strategies along with the SEAL project and behaviour

support initiatives have had a positive impact, resulting in a reduction in reported incidents of bullying in school and in low level disruption. Effective joint working as part of the sexual health strategy is demonstrated through the support provided to teachers by school nurses in the implementation of the SEAL programme across schools on the Isle of Wight

28. Children and young people make a limited contribution to the strategic development of services and as yet do not contribute to the work of the LCSB. Although children and young people's views are considered well in the assessments of children in need, their contribution and full participation at child protection conferences are underdeveloped. Young people's views are not contributing significantly enough to the strategic planning of health services within the PCT. That said there are some examples of young people being involved in health service planning at an operational level.

### **The quality of provision**

### **Grade 3 (adequate)**

29. The quality of provision is adequate. Thresholds within the referral and assessment service are consistently applied to referrals for a social care service and are well understood by other agencies. The arrangements for the use of the CAF are also well understood by other agencies. Health professionals use the CAF effectively; midwives and health visitors are enthusiastic about the benefits it has brought through improved multi-agency care planning and service delivery. A significantly high number of contacts received by social care from the police relate to domestic abuse. Local agencies have responded appropriately by trialling an alternative model of multi-agency screening to ensure that contacts are appropriately prioritised and health and education agencies also receive relevant information; the success of this initiative has yet to be seen.
30. Early intervention provision through the use of the CAF is good and is increasingly effective in identifying and meeting needs. Good efforts have been made to ensure that links with other provision, for example the youth offending service and multi-agency risk assessment conferencing, are robust. Children and parents describe how the CAF has made a 'proper difference' to their lives. The process is resulting in positive outcomes for children, including improved attendance and reduced exclusions from school. Children's centres demonstrate effective multi-agency working and provide well integrated care, including a comprehensive contribution from midwifery community health staff. Feedback from young people has been used well to develop a more accessible young persons' contraceptive service.
31. Children and young people in receipt of services are provided with information on how to make complaint and investigation arrangements are satisfactory. Most complaints are resolved at an early stage although

capacity issues mean that early resolution is not consistently achieved. While children and young people subject to child in need and child protection plans have access to independent advocacy, there is scope to improve take up on the currently low numbers of children and young people using this service.

32. CAMHS provision is inadequate. Children requiring early intervention in respect of their emotional well-being are unable to access appropriate support. There are too few primary mental health workers. Children and young people who require admission to hospital for mental health reasons do not have access to appropriate care in an environment suited to their age and development. The PCT and partner agencies are well aware of the issues and planned action to address these has been agreed. The needs of children with attention deficit hyperactivity disorder (ADHD) and those on the autistic spectrum (ASD) are not being met in an integrated way. There are no care pathway arrangements for children and young people with ASD and the existing care pathway process for ADHD is out of date.
33. Arrangements for the provision of specialist equipment by the PCT for children with complex needs are inadequate and, although the demand for most equipment can be met, there is an unacceptable wait of over six months for wheelchairs. The PCT is taking action to remedy this situation.
34. Assessment, direct work and care planning practice within children's social care are adequate although the quality of recording is very variable and a significant proportion of assessments and plans are poorly recorded. There are no cases awaiting allocation to a social worker, although significant staffing vacancies in social care have led to delays in the timely recording of assessments. The council's data demonstrate that the timeliness of assessments has improved during 2009/10 and is now closer to similar authorities and the national average. The percentage of initial assessments carried out on time fluctuate during the year and robust action plans are in place to ensure that progress is sustained and further improved. The quality of initial and core assessments is variable. Although child protection risks are identified and children are seen in a timely way, the general depth of analysis in the assessments examined is insufficient. The emergency duty service provides an appropriate and satisfactory response to safeguarding concerns.
35. The need for child protection investigations are promptly identified and completed by trained and experienced social workers. Validated performance data for 2008/09 show that the timely progression to initial case conferences continues to improve and compares well with the national average; more recent invalidated data confirm this trend. Children subject to child protection plans are visited regularly, and agencies work well together to reduce risks. Conferences are well attended by all agencies and an increasing number of written contributions are received

from general practitioners. From the case files examined, inspectors identified that attendance by health visitors and other health care staff at child protection conferences is good. Children and parents are encouraged to participate but children do not attend frequently. Chairs of child protection conferences provide effective challenge and improvements have been made to safely reduce the length of time children remain subject to plans. However, in the last two years 22% of child protection reviews were not completed within the required timescale. There are also significant delays in the distribution of child protection case conference minutes and plans. A shortfall in capacity of the independent reviewing service has contributed to poor performance in these areas and the service remains under resourced.

36. A significant number of cases tracked during the inspection did not provide sufficient written evidence of the quality of work undertaken. Too many assessments and care plans do not record a full analysis of risk and protective factors, or clearly state what needs to change and improve. Core group meetings are taking place on a timely basis and child protection plans are being regularly reviewed, although the rigour of risk analysis at these meetings is inconsistent. The council has recognised that the ICS does not provide an adequate platform for risk analysis and the effective recording of practice. For example, the report exemplars require revision as a tool to assist social workers in the identification and recording of risk and effective written feedback to parents. The council has started to take action to address this by scoping the options, including the procurement of a new electronic system.

### **Leadership and management**

### **Grade 3 (adequate)**

37. Leadership and management of safeguarding services for children and young people are adequate. There is recent but clear evidence that the key areas for development are now being competently tackled by the council and its partners, based on a sound analysis of current and future challenges to provision. Elected members are committed and supportive of management to make further necessary investment in – and improvements to – safeguarding provision and practice.
38. Ambition and prioritisation are adequate. The Children's Trust is committed to improving safeguarding outcomes for all children on the island. Strategic partnership work within the trust is suitably supported by the leadership provided by the chair of the Board, a non-executive director of NHS Isle of Wight PCT. Meetings are well attended by representatives of a wide and appropriate range of partner agencies, including health commissioners and providers and the community and voluntary sectors. Partners are committed to making the Board function more effectively and the new model of island-wide groups to identify issues and implement agreed priorities supports the Children's Trust Board to strengthen its

delivery function and impact of provision. It is too early to see the impact of these new arrangements.

39. The Children and Young People's Plan appropriately prioritises the role of the LSCB to drive forward improvements in safeguarding. The LSCB is fulfilling its statutory functions and is appropriately supported by a committed senior membership. Changes in the leadership of the Board over time have seriously affected the direction of travel and have only recently been addressed by the appointment of a new independent chair. Whilst the relationship of the Board with the Children's Trust is being developed, progress has been too slow; this has resulted in insufficient challenge and agreement about the safeguarding priorities for the island. Performance is regularly reported to the LSCB, notably from the serious case review sub group and the work of the local authority designated officer. The LSCB child death overview panel is well established and fulfilling its responsibilities in a timely and appropriate manner. The focus for the panel so far has been on operational implementation of the child death review processes at a local level. One serious case review has been evaluated as adequate by Ofsted. Almost all recommendations from this review have been implemented. Safeguarding is prioritised within the Children and Young People's Plan, and is based upon the views of a good cross section of children and young people. This was reviewed one year on with a focus on reporting on progress against the local area agreement priorities and targets for improving safeguarding outcomes for children and young people. Monitoring of these targets by the Children's Trust is robust and agencies are held to account for performance in these areas. The performance framework based upon the local area agreement is limited and does not fully capture safeguarding priorities or more detailed performance measures for the island.
40. The island's schools are viewed by the council and partnership as central to the drive to improve outcomes for children and young people. A major school reorganisation is in progress and has featured significantly in the business priorities for the council and schools on the island. While elected members receive regular information from the lead member for children's services on safeguarding matters, there has been insufficient scrutiny and challenge on the wider safeguarding priorities for the island.
41. The arrangements for performance management, quality assurance and workforce development are adequate but variable across the partnership and within the organisations inspected. The council has successfully established service level performance review boards, chaired by the head of service to hold managers to account for their performance. Service and front line audits take place on a regular basis and are particularly strong in the evaluation of the impact of the CAF. There is inconsistent evidence of improvement in practice following audit; for example in the areas of supervision and the need for more robust management oversight and challenge of casework decision making. The PCT is working with its

partners to improve the quality of services commissioned, with strategic planning informed through the Joint Strategic Needs Assessment carried out in 2009. The PCT has effective performance monitoring systems in place to monitor safeguarding of children in the services which it both commissions and provides. Contract specifications and monitoring processes have been revised and strengthened. Progress is rated and supported with a clear analysis of issues and progress against action plans.

42. The recruitment and retention strategy for social care workforce is pragmatic, well conceived and is sufficiently resourced to respond to the significant deficiency in capacity. Training and development within health and social care are well regarded. The workforce development team has constructed a comprehensive programme to meet locality and specialist needs on a multi-agency basis. The impact of this new programme will be monitored through the Integrated Working Board, chaired by the Director of Children's Services, although it is currently too early to evaluate impact. The PCT has implemented a trust-wide safeguarding and training policy and although there have been delays in accessing current training data, the target for 80% of all staff attending level one training will be met by October 2010. Training of junior doctors in the Accident and Emergency department at St Mary's hospital has been specifically targeted by the safeguarding team as a priority area to ensure safe practice. The monitoring of independent contractors' safeguarding arrangements are inadequate; 50% of General Practitioners (GPs) have undertaken level two training this year but no formal monitoring of all independent contractors is currently undertaken.
43. User engagement is adequate. Vulnerable children and young people are appropriately engaged in assessments and reviews of their plans. Their views are regularly sought and recorded. Good action has been taken to obtain their views about the CAF process, and further systematic investigation is planned. However, children are not currently contributing to the work of the LSCB. Service users seen by the inspection team generally express satisfaction with the quality of services including the range and quality of provision within children's centres. They report that they are treated with dignity and respect. Some parents with children with disabilities report significant difficulties in accessing specialist therapy services, particularly occupational therapy and physiotherapy. The need for additional support services such as occupational therapists and physiotherapists has been recognised by the PCT and additional resources have been allocated to recruit two occupational therapists and one physiotherapist.
44. Children and young people have a clear voice in influencing the development of early intervention provision and the types of positive activities provided for them. Consultation with children and young people is a key principle within the 'You're Welcome' quality criteria for health



services. Young carers have good opportunities to contribute their views and ideas. However, young people's strategic engagement is at an early stage. They participate in consultation events and evaluation of activities to improve provision. The Youth Council has a role in ratifying strategic decisions and young people were involved in interviewing recently appointed senior officers. However, although there are examples of contribution to service delivery such as the review of sexual health services, children and young people's direct input to decision making and evaluation through scrutiny committees or strategic decision making forums is underdeveloped.

45. Partnership working is adequate. Early intervention services are well provided and integrated through the CAF process. Multi-agency work to respond to the needs of children affected by domestic abuse through the MARAC is good. The contribution made by mental health services is inadequate, as children and parents are not able to access appropriate levels of intervention and support early enough. The LCSB, supported by its committed membership, is adequately fulfilling its statutory functions. The Board has recently completed an audit of the duty to co-operate, which made good use of peer review to specify the required improvements in all partner agencies. Performance has been regularly reported to the Board, notably from the serious case review sub group and with regards to the work of the local designated officer. The child death group is adequately fulfilling its statutory responsibilities. The arrangements between the Board and the Children's Trust are under developed.
46. Equality and diversity practice in safeguarding is good overall. The diversity and equality strategy is implemented effectively by front line workers with a strong focus on making services accessible for those who do not engage with universal provision including those in remote rural areas and travelling families. Partners know the local community well and work effectively together to identify and respond to the needs of vulnerable children. There is a strong focus on identifying young people at risk of criminal or drug related activity and engaging them in positive activities. Good targeted support in schools is raising the attainment of disadvantaged and under achieving pupils and narrowing the achievement gap between high schools, with the most significant gains being made in the schools in the most disadvantaged areas. There is high level commitment from health partners to ensure equality and diversity issues are part of everyday practice. Access to translation and language line services is generally good and is easily available for hospital and community health staff, who have a wide range of multi-cultural material and resources available to them. The partnership recognises however that the development of a cohesive strategy for equality and diversity is needed and requires more focused attention in the Children and Young People's Plan.

47. Service users seen during the course of this inspection generally express satisfaction with the services they receive and are treated with dignity and respect. The Youth Council has recently been involved in interviews of senior officers and contributed to service development, although involvement of young people in scrutiny and strategic decision making is as yet underdeveloped.
48. Safeguarding services provide adequate value for money. There is clear and focused attention to improving value for money by the council and partnership. The Family Intervention Programme offers well targeted support to reduce offending and for re-entry to school where attendance has been problematic. This approach has delivered good value for money in reducing costs to the Youth Offending Service and the Pupil Referral Units. Partners are working well to align successfully commissioning activity, including extensive use of the CAF and developing services around schools, extended school provision and children's centres.. A consultation exercise with young people and stakeholders is to commence on the future delivery of youth services on the island. The council acknowledges that more work is needed to ensure that resources are being effectively targeted, and will be undertaking a root and branch review of how much of the money and resources used to run individual services gets to the families who need it. The development of a joint commissioning strategy by the partnership, initially prioritising safeguarding and progress in appointing a coordinator to oversee this strategic work, has been delayed and is being reviewed to take account of recent changes in government policy.

## The inspection outcomes: services for looked after children

### Overall effectiveness

### Grade 3 (adequate)

49. The effectiveness of services for looked after children is adequate. While the council and partners are working hard to improve performance across the five outcome areas for looked after children, this has begun from a low base. It is acknowledged that further work is needed to ensure that high quality services are provided to improve outcomes for looked after children on the island. Recent and sustained effort to improve the quality of services and outcomes for looked after children is showing positive impact. Health outcomes for looked after children are adequate, with recent improvement in the percentage of looked after children with an up to date health assessment review, dental check and immunisations. However, the PCT does not monitor the quality of health reviews or the provision of CAMHS for looked after children in off-island placements. Staying safe outcomes for looked after children are adequate with recent improvement in long term placement stability. The vast majority of looked after children are allocated a suitably qualified social worker, although the impact of social work vacancies in the looked after children team has occasionally resulted in children having no allocated social worker in the past year. Enjoy and achieve outcomes are adequate with improvement in the completion rates of personal education plans. There are good strategies in place to support looked after children at risk of exclusion, however, too many children have had 25 or more days' absence from school. Positive contribution outcomes are adequate. The opportunities for looked after children to have a say in the way in which their needs are met are increasing through the Isle of Wight Council's Pledge to Children in Care and the establishment of a Children in Care Council, however, their involvement in strategic decision making is underdeveloped. Economic well-being outcomes for looked after children are adequate. Currently the proportion of care leavers who are not in education, employment or training from ages 17 to 19 years is proportionately much higher than it is for all young people on the island overall.
50. The outcomes of Ofsted's regulatory inspections of council services for looked after children are satisfactory or better. Nevertheless, although the council has put in place robust measures to reduce the high social work vacancy rates and tackle areas of weak practice and recording, these still pose significant challenges.
51. The quality of provision for looked after children is adequate. Whilst there is evidence of some good quality assessments, many lack sufficient analysis. The use of core assessments to identify need and direct care planning is not well established across children's services and the quality of care plans consequently remains variable. Significant drift has been a feature of some of the care plans examined. Robust steps have been

taken to improve quality assurance arrangements provided by the independent reviewing officer service, but this continues to be a high priority for the council to monitor and address. The participation of looked after children in their reviews, and their satisfaction with the process, are good and the timeliness of these reviews has improved. The quality of managerial oversight and supervision is variable but is acknowledged as an area for improvement.

## **Capacity for improvement**

## **Grade 3 (adequate)**

52. Capacity to improve is adequate. The council and its partners have a satisfactory track record of providing some improvements to service provision and outcomes. The new Director of Children Services and the senior management team are highly regarded by staff and partners, and are providing clear leadership and direction to improve front line services. Strengths and weaknesses are clearly understood and effective targeted action has been taken to improve outcomes for looked after children. Staff morale is increasing and good progress is being made to tackle some of the historical factors which have significantly affected performance and delivery. Recent and robust steps have been taken to improve the recruitment of social workers through an enhanced remuneration package for social work staff and a national recruitment campaign. Improved outcomes for looked after children have resulted from improvements in the quality of service provision, such as the percentage of looked after children receiving a health assessment, improved placement stability and the numbers receiving completed personal education plans. The council also recognises the deficiencies in the ICS recording system and are engaged in commissioning an effective replacement.
53. The Children's Trust's arrangements and the priorities of the Children and Young People's Plan focus partners' attention on securing improvements in outcomes for vulnerable children, including looked after children. In the summary of progress in the plan one year on, improvement is particularly evident in the stability of placements for looked after children and promoting the participation of looked after children, as well as celebrating their success. Nevertheless, the priorities and performance targets directly linked to looked after children are limited. Arrangements for performance management and evaluation are clearly established in social care with service boards established to review performance, risk and finance with managers. Outcomes of this process are fed into the Directorate and Scrutiny Boards. Supervision and case file audits are regularly undertaken, leading to key recommendations being made. Inspectors found limited evidence of impact from these audits, particularly with regard to the quality of managerial oversight and decision making. The PCT has recognised the need to improve performance monitoring of the health provision for looked after children.

54. Partnership working is adequate. The corporate parenting board has been established and is beginning to show some signs of impact in responding to issues raised by representatives of the Children in Care Council who are members. The looked after children's education service team (LACES) and school improvement partners monitor the progress of children and provide good levels of support to schools. The post-16 team and independent reviewing officers liaise effectively with other local authorities to ensure looked after children are in appropriate placements and receiving appropriate levels of support. The contribution of CAMHS and the provision of dedicated mental health support to looked after children are inadequate. The sufficiency of the funding by the council is adequate when compared with other similar authorities. Value for money efficiencies are being developed and are beginning to show some positive impact. A systematic and strategic approach to placement commissioning has yet to be put in place to ensure that best value and quality are secured.

### **Areas for improvement**

55. In order to improve the quality of provision and services for looked after children and care leavers in the Isle of Wight, the local authority and its partners should take the following action:

#### **Immediately:**

- Ensure improvement in the quality of social worker supervision and managerial oversight; particularly to tackle and prevent further drift in plans for looked after children.
- Ensure that the access to specialist mental health support for looked after children is significantly improved.

#### **Within three months:**

- Ensure recruitment in key social care posts, in order to address the significant shortfalls in front line services, including the service manager post for looked after children.
- Ensure the performance framework of the Children's Trust is reviewed to fully reflect the priorities for looked after children, and is incorporated in the progress review of the Children and Young People's Plan.

#### **Within six months**

- Strengthen scrutiny and challenge arrangements within the council to improve outcomes for looked after children.

## Outcomes for children and young people

56. Being healthy outcomes for children and young people are adequate. Health provision for looked after children on the island is now adequate and the outcomes for health have recently improved to a generally satisfactory level. The looked after children health team was performing poorly, particularly with regard to the relatively low percentage of looked after children receiving timely health review assessments. However, following a redesign of health provision earlier this year, the percentage of looked after children with an up to date assessment review, dental provision and up to date immunisations all demonstrate improvement. All initial medical assessments for looked after children are carried out by the designated doctor or community paediatricians. Following the appointment of the looked after children nurse the recorded rates of medical review assessments for looked after children have increased from 54% to 63% and there has been improved uptake of dental checks to 79%. There is little mental health support available for looked after children due to long term sick leave of the staff concerned and there has been no specific alternative provision of mental health support for looked after children. The looked after children nurse is developing input to support foster carers through healthy lifestyle training but this support is not currently in place.
57. Health promotion information is provided during health assessment reviews and includes advice on healthy lifestyle choices. Support and contraceptive advice are provided by the looked after children nurse and the sexual health team. There are low levels of pregnancies, teenage parents, and unplanned second pregnancies among looked after young people. The quality of looked after children's health records is variable and not all records are complete. It is therefore not always possible to identify whether objectives identified within the health care plan have been achieved. The looked after children nurse has recently audited current health records, and as a result British Association for Fostering and Adoption documentation has been introduced to ensure a more structured record of health assessment activity.
58. Staying safe outcomes have improved and are now at an adequate level. The vast majority of looked after children are allocated a suitably qualified social worker, who takes responsibility for coordinating care plans. However, a very small number of children have no allocated social worker with team managers temporarily holding case responsibility. The impact of social work vacancies in the looked after children team has resulted on occasions in children having no allocated social worker for a number of months in the past year. The senior management team has tackled this problem and reinforced a commitment by setting up cross-team working to temporarily minimise disruption and maintain basic statutory visiting and review requirements. Social workers do visit regularly and record where they have seen the young person alone.

59. A range of services for looked after children support placements and prevent placement disruption. These include targeted therapeutic support from dedicated therapists working from the fostering and adoption team and on a developing basis from the Rapid Response Team. These initiatives alongside improved gate keeping and review systems, including stability meetings, have begun to bring about improvements in long-term placement stability.
60. Looked after children and care leavers report feeling safe in their placement and 94% of children and young people who responded to the Care4me survey reported that the care they receive is good or better. A range of housing options for post 16 care leavers is available and the supported lodgings scheme is well-developed, offering continued accommodation for young people who move temporarily for example to attend university. Looked after young people do not receive priority status for social housing, and in some cases considerable time has elapsed before permanent tenancies have been secured.
61. Enjoy and achieve outcomes for looked after children are adequate. Children make good progress in the Early Years Foundation Stage and at Key Stage 1, reflecting the higher than average levels of achievement of all children in the early years. Tracking information provided by the local authority indicates that outcomes at Key Stage 2 show improvement in 2010, with the majority of looked after children making expected progress. Standards also improved at Key Stage 4 with most children making satisfactory progress from their starting points. Nevertheless, the outcomes in tests and examinations at Key Stage 4 results are lower than they are for looked after children (LAC) nationally. In 2009, 20 looked after children were eligible and 82% sat the exams. Of those, 59% obtained at least one GCSE A\*-C grade or GNVQ which was below statistical neighbours and national average for looked after children. The percentage of looked after children attaining five GCSEs at A\*-C grades was also below average. More positively the percentage of looked after children sitting GCSE has increased since 2007 and 59% obtained five GCSEs at A\*-G which is above that of statistical neighbours and the national average. The attainment gap between looked after children and all pupils in the Isle of Wight is slightly less than the national average. The proportion of looked after children with statements of SEN is in line with the national average. Where achievement is lower than expected, the LACES team and school improvement partners monitor the progress of children and provide good levels of support to schools and children. The LACES team knows the children well and works effectively with schools and social care services to improve the quality of children's personal education plans (PEPs). Completion rates have improved from 40% to 93%, although some issues remain with the completion of 20 day PEPs for children placed out of borough on the mainland. The team is aware of where improvements are needed to ensure consistency in quality, improve target setting and enable children to fully contribute their views. The

appointment of the virtual school head teacher has been delayed but has now been made. Forward planning for the virtual school is appropriate.

62. There are good strategies in place to support looked after children at risk of exclusion: none have been permanently excluded from school in the last four years. The number of looked after children receiving a fixed term exclusion from school has remained constant at 17, and the incidence of multiple fixed term exclusions is reducing. Those who are excluded for a fixed term receive appropriate support in the pupil referral units or alternative provision. Attendance has been a focus area and is rigorously monitored by the local authority inclusion officer. Support to schools, carers, and children and young people has helped schools steadily reduce absenteeism and persistent absence, however there are still too many looked after children with 25 days' absence or more.
63. The looked after children and care leaver focus group reported that they feel generally well supported at school and through further education, both financially and personally, although they have varied experiences depending on the schools they have attended, with some looked after children reporting that their needs were not well understood or met.
64. Opportunities for looked after children to make a positive contribution are adequate and improving. Looked after children and care leavers interviewed state that the Children in Care Council (CiCC) provides a regular and effective forum for them to express their views. There has been recent success in expanding membership from five to 21 young people, with the goal being to increase to 40. The terms of reference of the CiCC have recently been amended to reduce the number of officers on the council, and there are now closer links through the council to the Corporate Parenting Board. Children in care report they have been actively involved in developing the six individual elements of The Pledge. A named officer with lead responsibility for each of the six individual pledges enables progress to be more closely scrutinised and accelerated. Similarly, the Leading Improvements for Looked After Children (LILAC) initiative is being implemented across the island, focusing on ensuring that looked after children and young people are involved in decisions about their individual care, and policies and practices of services that look after them. The development of the initiative remains in the early stages, but has the potential to enable young people to play an increasingly more significant role in evaluating services and training. The workforce development team is working closely with the Children's Participation Officer to ensure that looked after children make a meaningful contribution in the design and delivery of training. Looked after children and care leavers are already involved in the direct delivery of the Newly Qualified Social Work Programme.
65. There is a strong multi-agency approach to providing positive diversionary activities for children and young people who are at risk of criminal activity,



anti-social behaviour, substance misuse or other unsuitable activities. Looked after children have opportunities to take part, with priority places in some activities, with good access to enrichment activities. There are also targeted support activities such as InteractED Mentoring which has given mentor support to looked after children and young people in learning new skills and hobbies, and dealing with challenges such as anger management and staying out of trouble. Outcomes for looked after children and young people engaged in positive activity programmes are good. Reports indicate positive outcomes in relation to building self-confidence, improved attendance at school, and engaging in positive learning and creative activities. As a result of the good strategies in place to prevent offending, the percentage of looked after children who are cautioned or convicted has decreased and performance on this measure is better than that of similar areas and nationally.

66. The independent advocacy service is well developed and there is good awareness amongst professionals working with children of the services it provides. A range of publicity material, including material for children with learning and communication difficulties, has been developed and distributed to looked after children, and their awareness of the service also appears to be growing. The advocacy service has intervened in individual cases with some success. Through regular reports it informs the council of any themes or patterns that it has identified. Capacity within the looked after teams is a regular feature in these reports, with a particular focus upon the impact of multiple and poorly managed changes of social worker. An independent visitor scheme has also been contracted but is developed to a lesser extent than the advocacy service; currently there are only two young people matched.
67. The impact of partnership working to support and improve care leavers economic well-being is adequate. The majority of care leavers have access to decent, affordable and permanent accommodation which meets most of their needs and where they report that they feel safe. Care leavers who met with inspectors reported that their accommodation meets their needs. They welcomed the range of options available through the supported lodgings scheme. This scheme includes the expectation that placements will remain open when young people leave the island temporarily, for example to attend university. Young people also spoke of the value of having access to the training flat, although with placements time-limited to two weeks the opportunity to fully test both skills and the desire to live independently is restricted.
68. Young people report that they are happy with the support they now receive to develop life skills from the post-16 team. Some disruption was previously caused to these services when it was decided that older young people should remain in the looked after children team rather than transfer to a specialist post-16 service. While this decision has now been reversed, the service that older young people received from a non-

specialist team where capacity was known to be problematic resulted in a legacy of poor quality work that is still being corrected. Pathway Plans are currently being reviewed to ensure that they set specific, measurable and realistic targets. Transition plans for young people with learning difficulties and/or disabilities receiving services are likely to benefit from the decision to transfer cases from the children with disabilities service to the post-16 service, where there is already a clear focus on ensuring a smooth transition to adult services and further education, employment or training.

69. Work-based learning and work experience opportunities are valued by looked after children and care leavers. While the council has signed up to the National Employability Scheme, the scheme remains significantly under-developed and there is currently only one placement offered to care leavers across all council departments. As the council is a major employer on the island, obvious potential employment opportunities are being lost for this group of young people.
70. The proportion of 19 year olds achieving Level 2 and Level 3 qualifications has increased. In 2008/09 the proportion of care leavers in employment, education or training was very low at 28.6%, compared with 62.9% nationally. It was much lower for care leavers at ages 17-19 than for all young people in that age range on the island. Addressing this issue for care leavers and young people is a high priority for the local authority. In September 2010, 11 out of 12 looked after children aged 16 went into employment or further education; the current level of young people not in employment, education and training (NEET) has reduced.

### **The quality of provision**

### **Grade 3 (adequate)**

71. The quality of provision for looked after children is adequate overall. The council is aware that that the number of looked after children remains high and has committed significant resources to examining the reasons for this. Thresholds have been reviewed and agreed across partner agencies and formalised gate keeping systems are now in place and used to approve and review all requests for accommodation. Fostering provision is adequate and service provision developments include the piloting of a fee-based carer scheme which it is hoped will reduce the need to purchase specialist placements, particularly those off-island. As members of a local adoption consortium, the Isle of Wight has access to a range of adoptive placements without interagency fees applying. With relatively high numbers of looked after children placed with relatives, the council has rightly reviewed its special guardianship order (SGO) financial support package. The SGO officer vacancy remains unfilled and this may impact upon take-up rates.
72. The quality of the council's own provided or commissioned educational support for looked after children and schools with looked after children has been lacking in the past but has more recently shown improvement

and is currently satisfactory. This view is endorsed by head teachers and designated teachers who note some improvement in the quality of support provided since the multi-agency conference in March 2009 which promoted a better understanding of the role of different agencies in supporting LAC. Although a virtual head teacher has only just been appointed, the LACES team provide good levels of support, including PEPs training and monitoring, progress tracking and support and challenge to schools. The personal education allowance is partly allocated to schools to provide one-to-one tuition, and some is used to support particular interests and hobbies such as dance and sailing. Foster carers report that the personal education allowance is difficult to access. All looked after children have access to a personal computer and internet; if their carer does not have this facility, the local authority provides a desktop or laptop computer. 'Aiming High' funding has been used effectively to enable children with learning difficulties or disabilities to access activities, for example, through the purchase of all terrain buggies and a caravan for short breaks and sailing courses, however there are long waits for short breaks. Access to Educational Psychology support and CAMHS for this group of children and young people has also been restricted due to capacity issues in these services.

73. Significant and ongoing social work and management vacancies, including the absence of a Looked After Children Service Manager, continue to pose a threat to the operation of services for looked after children. This has led to some poor outcomes for children; a legacy of placement drift still remains in some cases. Most looked after children and care leavers are aware of how to complain and make representations. The independent advocacy service is well developed and there is good awareness amongst professionals working with children of the services it provides. A range of publicity material, including material for children with learning and communication difficulties, has been developed and distributed to looked after children, and their awareness of the service also appears to be growing. The advocacy service has intervened in individual cases with some success and through regular reports informs the council of any themes or patterns that it has identified. Capacity within the looked after teams is a regular feature in these reports, with a particular focus upon the impact of multiple and poorly managed changes of social worker. An independent visitor scheme has also been contracted but is less well developed than the advocacy service; currently there are only two young people matched. The corporate parenting group also monitors complaints, so that themes and patterns may be identified and used to inform service development.
74. Assessment and direct work with looked children and care leavers is adequate. While there is evidence of some good quality assessment, several assessments examined by inspectors were largely narrative in content and lacked sufficient analysis. The use of core assessments to identify need and direct care planning is not well established across

children's services and the quality of care plans consequently remains variable. Front line managers are aware of this but staffing deficits within teams have, to date, prevented practice from improving.

75. The Independent Reviewing Officers (IRO), through the Problem Resolution Protocol (PRP), have recently provided an increased level of challenge to – and oversight of the effectiveness of care planning. The protocol was introduced to resolve intractable disputes between social workers and young people in review meetings. Quality assurance processes are in place including direct feedback on individual cases and quarterly management information reports. These reports show that compliance with statutory responsibilities remains a common concern. Through the PRP between 2009/10, IROs raised concerns regarding care planning for 46 children; approximately 25% of all children in care. The capacity of the IRO team is a particular concern given the number of children who currently live off-island. However, children's participation in looked after children reviews and their reported levels of satisfaction with the process are good. The timeliness of reviews is improving, with latest figures showing rates that are in line with similar authorities. A focus on joint working across teams has compensated for some of the shortfalls in social worker capacity and has enabled some children to benefit from sustained relationships with professionals whom they know well. In specific cases this has led to better quality assessments and direct work. In these cases, drift has been challenged and positive outcomes secured.
76. Looked after children are allocated to an appropriate social worker, who actively coordinates a care plan including the provision of direct work, visits the child in placement and sees them alone. Positive action has been taken to minimise inappropriate and unnecessary changes of placement through the introduction of placement stability meetings, revision to foster carer agreements and formal monitoring at senior management and corporate parenting level. These strategies have had a marked impact upon the stability of long-term placements.
77. When interviewed, social workers displayed a much clearer understanding of key issues and of the priorities for care planning than was evident from a review of case records alone. Record keeping is in some cases incomplete and does not demonstrate that clear, sound decision making has been undertaken. The electronic recording system is a significant frustration to social workers and does not support them in their work. Recording templates are lengthy, do not support clear assessment of risk and require considerable amendment before they can be shared with children, their carers and family.

## Leadership and management

## Grade 3 (adequate)

78. The leadership and management of services for looked after children and young people are adequate. There is recent evidence that key areas for development for this group of children are now being competently tackled by the council and its partners. Ambition and prioritisation for looked after children are adequate. Clear direction and support are provided by the chair of the Children's Trust Board to ensure partners focus on agreed priorities, and agencies are held to account for performance in these areas. Meetings are well attended by representatives of a wide and appropriate range of partner agencies, and the community and voluntary sectors. The lead member for children services attends and appropriately provides a link through to the Corporate Parenting Panel. The Children's Trust is committed to improving outcomes for vulnerable groups of children and young people, including looked after children, which is suitably prioritised within the Children and Young People's Plan 2009–12. This was reviewed one year on. The priorities and targets directly linked to looked after children are limited, and performance monitoring of key indicators by the Children's Trust Board mainly focuses on targets in the local area agreement. For example, the need to improve performance for the number of looked after children with timely health assessments are not included in the review of the plan. The performance framework does not therefore fully capture the priorities and targets for looked after children.
79. The arrangements for performance management, quality assurance and workforce development are adequate although variable across the partnership. The council's service level performance review boards appropriately provide feedback to the Directorate Service Board as to their findings and action plans, with relevant information being escalated to the Cabinet. Elected members receive key performance information, as well as briefings from the lead member on looked after children services. Service and front line audits take place regularly, although the positive impact arising from this activity has not always been evident in cases examined during the inspection. For example, the quality of assessments, care planning and managerial oversight remain too variable. Improved gate keeping arrangements have been introduced, for example, the Admissions and Review Panel which reviews all children coming into the care system, the Permanency Planning Panel and the Joint Commissioning Solutions Panel, which meets monthly to agree commissioning arrangements for children in independent placements. The PCT recognises the need to improve performance monitoring with regard to the health of looked after children, including quarterly activity reports to the Board from the looked after children nurse on health provision for looked after children. The PCT does not have any arrangements in place for monitoring the quality of health reviews undertaken for children placed off the island; nor are there any clear arrangements for the provision of CAMHS for looked after children in out-of-area placements.

80. Workforce development is adequate, despite the current staffing difficulties in social care. Foster carers are fully recognised as part of the children and young people's workforce, and have full and free access to the integrated training programme. The Adoption and Fostering Team has commissioned an assessment of foster parents against the training and development standards for foster carers. Direct and focused attention on the Looked after Children Team is assisting in the development of training suited to their needs. The competence in care proceedings training was developed as a direct consequence of a training need being identified within the looked after children team. Multi-agency personal education plan training has been developed and will be added to the integrated training programme.
81. User engagement is adequate. Looked after children and their carers are regularly consulted about the types of events and activities they would like and can evaluate their success. The Star Awards, held annually to celebrate the personal achievements, contributions and development of the island's looked after children, are particularly valued. Disabled children have been involved in the development of generic and specialised services, including a recent successful bid to the government's 'Aiming High for Disabled Children'. Despite this, their role in influencing service development at a more strategic level is limited. For example, their views have not been taken into account in the restructuring of services, such as the looked after children education services. The engagement of looked after children in their reviews has improved and is now in line with similar authorities; those spoken to said they feel they can affect outcomes. Their full engagement is affected by the frequency of changes in social worker. Many young people indicated that this made it difficult to establish a long-lasting, trusting relationship. Agencies, including the voluntary sector, are increasingly reaching out into the community to secure relationships with young people who might otherwise have difficulty accessing services.
82. Partnership working is adequate. The statutory responsibilities of councillors and officers with regard to their corporate parenting responsibilities have been progressed through the establishment of the Corporate Parenting Board. The Board is chaired by the lead member and comprises mainly officers from the council and representatives from the Children in Care Council. The Board has successfully dealt with concerns raised by young people, for example confusion about after care allowances. In response the Board commissioned a rewrite of policy and guidance to care leavers. The Board acknowledges the need to establish clearer benchmarks against which to judge the service provided to looked after children. A range of initiatives has been developed to ensure that the lead member has regular contact with looked after children. The aim is to ensure that through regular contact communication is improved and the corporate parenting group develops a more detailed awareness of the needs of children looked after. Young people have led training in Total Respect delivered to staff and elected members. The wider engagement of

councillors, particularly through the scrutiny arrangements of the council, has not been secured.

83. The looked after children education service (LACES) and school improvement partners are providing good levels of support to schools and children where achievement is lower than expected. The completion rate for personal education plans has significantly improved. There is a strong multi-agency approach to providing diversionary activities for children and young people who are at risk of criminal activity, anti-social behaviour, substance misuse or other unsuitable activities, and the outcomes for looked after children involved in positive activities are good. Rates of offending in looked after children are comparatively low. The voluntary and community sectors are actively involved with commissioners in providing a wide range of services for children and young people with evidence of positive impact, for example through the independent advocacy service for looked after children. The council has yet to develop a more sophisticated understanding of its changing looked after children population and effective partnerships with external agencies to ensure that the placement needs of this group are appropriately planned for. This is recognised by the council and plans are in place, developed with the Government Office, to progress a placement commissioning strategy when funding for a looked after children commissioner has been secured.
84. The promotion of equality and diversity is adequate. Care is taken to ensure that placement matching takes account of children's cultural and faith needs for the very small percentage of looked after children from mixed or minority ethnic backgrounds. Where it is not possible to match placements, support is given to foster families and children to ensure their cultural and faith needs are met. There are gaps in services to meet the needs of children with challenging or complex special educational needs, including access to mental health support. Satisfactory action is being taken to build capacity of foster carers to provide for children with complex needs but developments are at early stages. The LACES team is increasingly monitoring individual children's progress and assessing their needs in school, but these developments are similarly very recent. There is, however, some evidence of improving educational outcomes with most children in care now making satisfactory progress from their starting points. Action is also being taken to support care leavers progressing into employment, education and training but it is too soon to see full impact.
85. The council's approach to gaining better value for money is adequate. The council intends to develop specific benchmarking data to inform service planning, however in respect of social care this will only be feasible once the recruitment exercise takes effect and the relationship between resource use and impact can be clearly established. The Family Intervention Programme has delivered good value for money and has led to significant savings by diverting children from care. The Admissions and Review Panel reviews all children coming into care and provides internal

challenge and scrutiny to decision making around thresholds and placement requirements, as well as an appraisal of costs and benefits. Although the council has no formal preferred provider list, placements are commissioned from a limited number of providers who are members of the council's Independent Providers Forum. This forum provides the council with the opportunity to better manage the market and achieve value for money. A sufficiency report has been produced for senior officers and members and proposals are in place to introduce a new tiered foster carer scheme and to extend the services offered by the one residential home operated by the council. The role of the Joint Commissioning Solutions Panel has been reviewed and this provides a forum through which the council is able to better understand the needs of its looked after children population and the range of placement options that are available. A systematic and strategic approach to placement commissioning has yet to be developed, in order that best value and quality are secured.



## Record of main findings: Isle of Wight

<b>Safeguarding services</b>	
Overall effectiveness	Adequate
Capacity for improvement	Adequate
<b>Outcomes for children and young people</b>	
Children and young people are safe: effectiveness of services in taking reasonable steps to ensure that children and young people are safe	Adequate
Children and young people feel safe: effectiveness of services in helping to ensure that children and young people feel safe	Adequate
<b>Quality of provision</b>	
Service responsiveness including complaints	Adequate
Assessment and direct work with children and families	Adequate
Case planning, review and recording	Adequate
<b>Leadership and management</b>	
Ambition and prioritisation	Adequate
Evaluation, including performance management, quality assurance and workforce development	Adequate
User engagement	Adequate
Partnerships	Adequate
Equality and diversity	Good
Value for money	Adequate

<b>Services for looked after children</b>	
Overall effectiveness	Adequate
Capacity for improvement	Adequate
<b>Outcomes for looked after children and care leavers</b>	
Being healthy	Adequate
Staying safe	Adequate
Enjoying and achieving	Adequate
Making a positive contribution	Adequate
Economic well-being	Adequate
<b>Quality of provision</b>	
Service responsiveness	Adequate
Assessment and direct work with children	Adequate
Case planning, review and recording	Adequate
<b>Leadership and management</b>	
Ambition and prioritisation	Adequate
Evaluation, including performance management, quality assurance and workforce development	Adequate
User engagement	Adequate
Partnerships	Adequate
Equality and diversity	Adequate
Value for money	Adequate